Case 3:08-cv-00438-H-LSP U.S. Department of Justice United States Marshals Service

Document ROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	De2 1 3m	COURT CASE NUMBER	R
RICARDO	LOPEZ	08-CV-0439	
DEFENDANT R.H. ME	SEL, Clinical Optometrist AM 8:51	TYPE OF PROCESS	
SERVE NAME OF INDIVIDUAL, COMPANY, CORPERATION DETERMINED DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
R.H. MEISEL, Clinical Optometrist ADDRESS (Street or RFD, Apartment No., City, State and ZIP Apartment)			
AT P.O. Box 731, 2302 Brown Road Imperial, CA. 92251			
SEND NOTICE	·	umber of process to be rved with this Form - 285	
į		umber of parties to be erved in this case	4
	1 .	heck for service	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All.			
	ers, and Estimated Times Available For Service):		Fold
Defendant is an employee at the Centinela State Prison in Imperial, CA.			
Signature of Atta	To a star Originator requesting comics on behalf of	ELEPHONE NUMBER	DATE
Michael Miles	ney or other Originator requesting service on behalf of: PLAINTIFF The property of the pr	ELEI HONE NOMBER	07-16-08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE			
I acknowledge re number of proce (Sign only first than one USM 2	s indicated. USM 285 if more Of Ofigh X to Sorve	USM8 Deputy or Clerk	Date 7 24 0
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.			
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)			
Name and title	of individual served (if not shown above)	cretion then re	uitable age and dis- siding in the defendant's
Address (sample	westing	usual place of	abode.
Address (comple	e only if different th an eko wn above)	80808	Marshal or Deputy # 3800
Service Fee	Total Mileage Charges (including endeavors) Forwarding Fee Total Charges Advance Deposits Ame	ount owed to U.S. Marshal or	Amount of Refund
REMARKS:	124/08-malled SEC		